

Please type a plus sign (+) inside this box ☐



PTO/SB/21 (6-99)

Approved for use through 09/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	09/905,348
		Filing Date	JULY 13, 2001
		First Named Inventor	AVI ASHKENAZI
		Group/Art Unit	1647
		Examiner Name	SAOUD, CHRISTINE J.
Total Number of Pages in This Submission	39	Attorney Docket Number	39780-1618 P2C18

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Version With Markings Showing Changes <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Copy of Notice	<input type="checkbox"/> Copy of an Assignment <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, by Assignee to Exclusion of Inventor Under 37 C.F.R. §3.71 With Revocation of Prior Powers <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> APPEAL COMMUNICATION TO GROUP (APPEAL NOTICE, BRIEF, REPLY BRIEF) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> ADDITIONAL ENCLOSURE(S) (PLEASE IDENTIFY BELOW): <input checked="" type="checkbox"/> EVIDENCE APPENDIX ITEMS 1-158 FILED ON JULY 23, 2007 BE APPENDED TO THIS REPLY		
<table border="1" style="width: 100%;"> <tr> <td style="width: 20%;">Remarks</td> <td> AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT <u>08-1641</u> FOR ANY FEES DUE IN CONNECTION WITH THIS PAPER, REFERENCING ATTORNEY'S DOCKET NO. <u>39780-1618 P2C18</u>. </td> </tr> </table>			Remarks	AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT <u>08-1641</u> FOR ANY FEES DUE IN CONNECTION WITH THIS PAPER, REFERENCING ATTORNEY'S DOCKET NO. <u>39780-1618 P2C18</u> .
Remarks	AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT <u>08-1641</u> FOR ANY FEES DUE IN CONNECTION WITH THIS PAPER, REFERENCING ATTORNEY'S DOCKET NO. <u>39780-1618 P2C18</u> .			

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual name	HELLER EHRMAN LLP 275 Middlefield Road, Menlo Park, California 94025			JEFFERY BERNHARDT (Reg. No. 54,997) Telephone: (650) 324-7000	Facsimile: (650) 324-0638
Signature					
Date	SEPTEMBER 24, 2007		Customer Number:	35489	

FILED VIA EFS
ON SEPTEMBER 24, 2007

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop ____, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.